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Bib Data Sheet

CONFIRMATION NO. 6603

|                             |  |              |                        |                                   |
|-----------------------------|--|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>10/519,204 | FILING OR 371(c)<br>DATE<br>01/27/2005<br>RULE | CLASS<br>385 | GROUP ART UNIT<br>2874 | ATTORNEY DOCKET NO.<br>0321.67638 |
|-----------------------------|--|--------------|------------------------|-----------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/US03/20352 06/27/2003 JYL  
 which claims benefit of 60/392,073 06/28/2002 JYL

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE JYL

## \*\* SMALL ENTITY \*\*

|   |  |                    |                         |
|---|--|--------------------|-------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  |                    |                         |
| Verifier and Acknowledged                                   | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Not after Allowance |                    |                         |
| Examiner's Signature  | Initials   |                    |                         |
| STATE OR COUNTRY<br>CA                                      | SHEETS DRAWING<br>2  | TOTAL CLAIMS<br>18 | INDEPENDENT CLAIMS<br>2 |

## ADDRESS

24978

## TITLE

Peripheral coupled traveling wave electro-absorption modulator

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>315 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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